

CITY OF ALEXANDRIA MARINA
DEPARTMENT OF RECREATION, PARKS & CULTURAL ACTIVITIES
<http://alexandriava.gov/recreation/index.html>
1108 Jefferson Street, Alexandria, VA 22314

Application for Visiting Commercial, Charter, Cruise, or Business Vessels

ALL QUESTIONS MUST BE COMPLETED

Date _____ 20____

Name of Organization _____

Vessel Name _____

Organization Address _____

Representatives Name _____ Phone () _____ Fax () _____

Email _____ Certificate of Inspection Expiration Date _____

(Attach copies of United States Coast Guard registration information)

Overall Length _____ Beam _____ Draft _____ Required Amps. _____
(Includes bow spirit)

Tonnage _____ Maximum No. Passengers _____ Max No. Crew _____

Rental Date(s) Requested _____

Time Rental To Begin _____ Time Rental To End _____

Requesting Utilities ____ Yes ____ No Sewage Pump Out Facility Use ____ Yes ____ NO

Insurance Information (Certificate of insurance must be submitted with application)

Insurance Company Name _____ Policy # _____ Amount \$ _____

The undersigned signs that he or she has received and read the regulations governing the use of the City pier facilities by commercial vessels and that these will be enforced and honored by the renting organization. The undersigned further certifies that he or she is the legally authorized representative to act and accept such responsibility for the organization. Final approval of this permit is contingent upon approval by the Director of the Department of Recreation and receipt of the required deposit.

Signature _____ Date _____

(FOR OFFICE USE ONLY)

Date Application Received _____ By _____

Insurance certificate Attached ____ Yes ____ No Certificate of Inspection Attached ____ Yes ____ No

FEES

| | | |
|-----------------|------------------|----------------|
| Base Rate | \$ _____ X _____ | Days |
| Passenger Rate | \$ _____ X _____ | No. Passengers |
| Utilities | \$ _____ X _____ | Days |
| Sewage Pump-Out | \$ _____ X _____ | Use |

TOTAL CHARGES

| | |
|-----------------------|-----------------|
| Base Rate | \$ _____ |
| Passenger Rate | \$ _____ |
| Utilities | \$ _____ |
| Sewage Pump-Out | \$ _____ |
| TOTAL FEES DUE | \$ _____ |

Total Fee of \$ _____ must be made on or before _____. Checks shall be made payable to the City of Alexandria and sent to the Department of Recreation, Parks and Cultural Activities, Capital Projects Division, 1108 Jefferson Street, Alexandria, Virginia 22314.

Request ☐ Approved ☐ Not Approved ☐ No conflict with Special events (Confirmed with _____)

Program Supervisor/Date _____

Division Chief/Date _____